

FLINT-GOODRIDGE HOSPITAL

THE FIRST
FIVE YEARS

ANNUAL REPORT
of the
SUPERINTENDENT
DECEMBER 31, 1936

FLINT-GOODRIDGE HOSPITAL
OF
DILLARD UNIVERSITY
NEW ORLEANS

December 31, 1936

The new Flint-Goodridge Hospital of Dillard University is the dream-child of many sources. Fifty years ago it had its beginning through the efforts of a small group of colored women who dreamed of having an institution where members of their race could receive medical attention. The institution was first known as the Phyllis Wheatley Hospital. After a few years New Orleans University took over the project, and through years of development, it became the Sarah Goodridge Hospital and later the Flint-Goodridge Hospital.

The old Flint-Goodridge, out of which the new hospital grew, rendered great service to the Negroes of the community but was greatly handicapped by the lack of adequate facilities. The coming of Dillard University gave birth to a new hospital which upon its opening five years ago was practically complete as to detail of construction and equipment. Like a well developed baby the new hospital was ready for growth, eager to learn and more anxious to serve.

However, its physical birth was comparatively a small factor among the many community interests which the hospital proudly possessed. The combined efforts of local Negroes and whites in raising funds for the construction of the new hospital, the untiring interest and efforts of many fine benefactors to help the hospital grow, and the human interest of the trustees, advisors and administrators - all these factors together have

developed the hospital into a unique community institution.

Five years ago we set out to develop Flint-Goodridge Hospital with a twofold purpose. First, to serve the health needs of the people of New Orleans as largely and efficiently as possible, and secondly, to provide facilities for the further training of Negro doctors, nurses and other hospital personnel. A brief summary account of the activities of the hospital during these five years is contained in the pages which follow.

An increasing appreciation of Flint-Goodridge Hospital by the community is evidenced by the larger number of patients served each year. In 1936 we served a total of 5,719 patients as compared with only 2,908 in 1932, an increase of 2,811 patients. Practically every ailment with which the human body is afflicted in the community was represented in these patients. Their care required the most modern equipment, the most efficient treatment and the most kindly interest of our doctors and nurses. The full pay and part pay patients were treated by their private physicians. The free patients were treated by the staff of the hospital. The latter are given the same high type of service in the wards without segregation or differences of any kind.

DAYS OF CARE GIVEN

	<u>Pay</u>	<u>Part Pay</u>	<u>Free</u>	<u>% Free</u>	<u>Total</u>
1932	3,823	1,371	4,494	45.6	9,688
1933	3,752	1,971	5,912	50.8	11,635
1934	3,797	1,962	6,579	52.5	12,338
1935	4,066	1,470	7,420	58.8	12,956
1936	5,774	1,614	6,665	46.4	14,053
Total	21,212	8,388	31,070	50.8	60,670

Our financial structure was built on the assumption that only 20 percent of our hospital service would be free. Because of the average of 50.8 percent free service rendered, in the interest of economy, we have adhered very closely during the last two years to hospitalizing free patients only so long as necessary. Consequently, the average days of bed occupancy for free patients has declined from 11 days in 1932 to 9.4 days in 1936.

The cost of rendering hospital service per patient per day was reduced during 1936 even though foods and most supplies increased in price. The per capita cost after deducting costs of departments and services not chargeable to the care of bed patients:

	<u>1932</u>	<u>1933</u>	<u>1934</u>	<u>1935</u>	<u>1936</u>
1. All Patients	\$3.96	\$3.13	\$3.10	\$3.23	\$3.19
2. Exclusive of Newly Borns	\$4.25	\$3.37	\$3.49	\$3.64	\$3.48

CLINIC SERVICES

In 1932 we opened with seven out-patient clinics. During the same year we added a syphilis clinic and a surgical dressings clinic; in 1935 a well baby clinic, a special diphtheria clinic and a diabetic clinic; in 1936 a tuberculosis clinic and a special eye clinic. Toward the end of 1936 arrangements were made for the establishment of a dental clinic. To these clinics a total of 81,179 visits have been made during the five years.

	<u>Visits</u>	<u>% Free</u>
1932	7,790	41.4
1933	16,475	65.5
1934	18,185	65.1
1935	21,084	81.0
1936	17,645	54.1

A fee of 25¢ was collected, when possible, from clinic patients until August, 1936 when the fee was reduced to 10¢. The charging of the fee is no attempt to cover cost, but rather to establish in the patient a sense of responsibility and self reliance. During 1933, 34 and 35 we served large numbers of federal relief clients who were directed to us, all of whom were free. The record for 1936 represents visits to the clinic by free choice of the patient.

The emergency or accident room of the hospital is becoming more popular. We are having a great variety of accident and first aid cases come to us for assistance, and their treatment is of great educational value to our internes.

SUMMARY OF ALL PATIENTS TREATED

	<u>1932</u>	<u>1933</u>	<u>1934</u>	<u>1935</u>	<u>1936</u>
No. of Hospital Patients	977	1,129	1,270	1,525	1,679
No. of Clinic Patients	1,858	3,000	2,828	2,652	2,305
No. of Emergency Patients	673	665	1,204	1,357	1,735
Total Patients Treated	2,908	4,794	5,302	5,534	5,719

To these patients many special services were performed:

	<u>1932</u>	<u>1933</u>	<u>1934</u>	<u>1935</u>	<u>1936</u>
Surgical Operations	541	535	588	639	743
X-ray Pictures	520	589	512	560	620
Laboratory Tests	6,989	12,493	14,264	14,147	12,918
Prescriptions Filled	2,607	2,269	3,026	3,656	4,274

SERVICE SATISFACTORY TO PATIENTS

The prime interest of a hospital is the care of its patients. Every effort converges on the patient, and the results of these efforts are very largely reflected in the attitude of the patient toward the service rendered. A hospital sells services the same as a hotel, a department store or a bank. "The customer is always right" is the

attitude we insist upon our personnel developing. To know the attitude of the patients, we give to each patient upon being discharged a letter asking that they report to the superintendent in a sealed envelope any criticism of the service, or any suggestion for improvement. A review of 1,539 notes from patients discharged during 1936 reveals that 1,498 were entirely satisfied and that 51 made the following complaints: nursing service - 28, unnecessary noises - 12, food service - 8, visitors disturbing - 2, smoking in the building and interne service one each.

Another index to the attitude of patients toward the hospital is revealed in part of a study made of the clinic patients who had had babies delivered in the hospital. The study was made through personal interview and was reported in a thesis as a part of the work required for the degree of Master of Social Work at Tulane University. Of 150 women interviewed 137 expressed absolute satisfaction with the service of the hospital and 13 expressed dissatisfaction. Most of these complaints also were on the nursing service, which is not unusual for hospitals in general. Nevertheless, this percentage of customer dissatisfaction is not an asset and that fact will receive most careful analysis and consideration.

THE MEDICAL STAFF

Although our primary consideration is the patients whom we serve, Flint-Goodridge Hospital is extremely interested in the professional development of the Negro doctors of this community. This interest is not merely incidental, for it is the desire of the hospital to train here a corps of the very best physicians and sur-

geons to be found any place. It is mainly for this reason that a large portion of the funds of the hospital are spent in maintaining the clinics and the free beds in the hospital as an opportunity for further research, training and experience.

Association with the Consultant Staff, most of whom are teachers in the Tulane University School of Medicine or the Louisiana State University School of Medicine, affords a splendid educational opportunity which is fully appreciated by a vast majority of the Negro doctors. For five years Dr. Lemann has made it possible for the hospital to subscribe to the most important medical journals, and during 1936 the Librarian of the Tulane University School of Medicine offered much of the facilities of that library to the members of our staff.

The wisdom of the Medical Advisory Board in planning the staff is revealed by the almost constant smoothness with which the Consultant and Active Staffs have worked together. In the beginning members of the Active Staff were all given the same rank, with the exception of Dr. Rivers Frederick who has served the whole period as Chief of the Department of Surgery. In 1934 the staff was ranked on the basis of ability. At the end of 1936 Dr. Logan W. Horton was elevated to the rank of Chief in the Department of Eye and the Department of Ear, Nose and Throat. The plan of the Medical Advisory Board to elevate Negro doctors to the head of each department will gradually materialize as they demonstrate the ability to assume that responsibility.

RESIDENT STAFF

Opportunities have been given to twenty young graduates in medicine to serve internships and residences here. These men have come from Howard, Meharry, Rush, Western Reserve and Dalhouise Medical Schools. Toward the close of 1936 funds were granted by the Julius Rosenwald Fund for the establishment of three residences which will offer opportunities for concentrated work in (a) General Medicine, (b) Syphilis and (c) Eye, and Ear, Nose and Throat.

DR. MILLER AND DR. HUME

Great losses were suffered during 1936 in the death of Dr. C. Jeff Miller, who served as Chairman of the Campaign Committee to raise funds for the erection of the hospital and as Chairman of the Medical Advisory Board from its beginning, and Dr. Joseph Hume, an original member of the Medical Advisory Board. Their wisdom and counsel and the professional prestige which their association contributed to the hospital is of inestimable value.

NURSING SERVICE

The School of Nursing which we inherited from the old hospital was discontinued in 1934. Since that time the hospital nursing service has been conducted by a staff of graduate nurses. We have not lessened our interest in the training of nurses, and we realize that the hospital shall not fully accomplish its aim until we are able to broaden our influence by sending forth a group of thoroughly trained nurses each year to meet the health needs of the community. We shall make every effort to reopen the school as soon as we have the required daily average of 50 patients

and available funds for the support of the school. Because of the shortage of funds, we are unable to maintain the type of graduate nursing service which we desire. It is to be hoped that our nursing service might be improved in the immediate future through an increase in pay patients. The daily average number of hospital patients served has been:

<u>1932</u>	<u>1933</u>	<u>1934</u>	<u>1935</u>	<u>1936</u>
29.0	31.9	33.8	35.3	38.4

HOSPITAL RATINGS

The extent to which the work of the medical staff and the nursing service measures up is indicated by the fact that the hospital is on the "Fully Approved List" of the American College of Surgeons, the highest scientific rating that can be given an American hospital. The hospital is also on the "Approved for Internship" list of the American Medical Association.

POSTGRADUATE COURSE FOR PHYSICIANS

In July of 1936 we conducted a postgraduate course for physicians to which sixty-two doctors came from eight states. The course ran for a period of two weeks. The faculty was composed principally of teachers in the medical schools of Tulane University and Louisiana State University. Lectures, clinics, operations and demonstrations were held at Flint-Goodridge, Charity Hospital, Touro Infirmary and at the two medical schools. The Medical Advisory Board thinks the course is a good idea, and it is our hope that we may offer this type of educational opportunity

to the Negro doctors in this section each summer, as has been requested by the doctors who attended in 1936.

This project was made possible through the generosity of Mr. & Mrs. Edgar B. Stern.

POPULAR HEALTH EDUCATION

Aside from the work in the hospital and in the clinics, Flint-Goodridge has conducted several community educational efforts. Among these has been the sponsorship of Mothers Clubs in eleven communities densely populated by Negroes; the observance of National Negro Health Week during three of the five years, as a means of calling to the attention of the public the importance of good health; the use of National Hospital Day as an occasion to bring people to the hospital on a friendly visit of inspection; calling attention to the very high incidence of syphilis and gonorrhea by means of a six weeks program including lectures and moving pictures to various groups; and cooperation with the summer playground program conducted by the Council of Social Agencies in arranging lectures for teen age girls and boys on important health matters.

Realizing the great handicap of poor housing, Flint-Goodridge initiated the effort to secure a federal low cost housing project for the Negroes of this community.

WOMAN'S AUXILIARY

As a means of interpreting its program to the community and increasing good will, a Woman's Auxiliary was organized in 1932. Membership in the Auxiliary is open to all women, and at present

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the membership is approximately two hundred. The hospital has arranged various series of health lectures for the Auxiliary, and they in turn have arranged diverse educational programs in various sections of the city. Aside from the educational efforts among themselves and in the community, the Auxiliary has contributed many hundreds of dollars for the beautification of the lawn, to the Social Service Department for emergency relief to unusually worthy clinic patients, for Christmas and other seasonal parties for patients, and special articles needed by the hospital. The Woman's Auxiliary has proven to be a great asset in extending the hospital into the community.

FINANCES

Once an old man gave this sage advice to a youth, "Do what you can with what you have". This precept may be said to have guided the efforts of the hospital during the past five years.

We have constantly enlarged our services each year in accordance with the increase in earnings and contributions, and there has been a corresponding increase in expenditures.

	<u>1932</u>	<u>1933</u>	<u>1934</u>	<u>1935</u>	<u>1936</u>
Earnings	\$26,942.96	\$27,557.23	\$28,353.11	\$32,316.58	\$37,210.45
Contributions	<u>16,214.00</u>	<u>17,262.52</u>	<u>21,251.81</u>	<u>23,092.28</u>	<u>22,906.58</u>
	\$43,156.96	\$44,819.75	\$49,604.92	\$55,408.86	\$60,117.03
Expenses	\$50,063.11	\$46,258.79	\$49,287.41	\$55,408.08	\$60,003.29
Operating Loss	\$ 6,906.15	\$ 1,439.04			
Operating Gain			\$317.51	\$.78	\$ 113.74
Uncollectable & Doubtful Accounts		\$ 1,803.71	\$ 2,904.79	\$ 2,898.86	\$ 2,198.07
Net Loss	\$ 6,906.15	\$ 3,242.75	\$ 2,587.28	\$ 2,898.08	\$ 2,084.33

During the last three years we have been able to more nearly predict our financial picture because of experience gained in the two previous year's operations. We were therefore able to keep our expenditures within our earnings. The uncollectable and doubtful accounts are written off only after the end of the second year, and they represent losses in earnings of the previous year. The percentage of earnings uncollected for the four years averages 8.5%.

A large portion of the losses shown above have been absorbed by Dillard University and the McEnery legacy. The net deficit of the hospital for the five years ending December 31, 1936 is \$8,261.96.

GROUP HOSPITALIZATION INSURANCE

In the fall of 1932 we entered into an agreement with the public school teachers of the city to furnish hospital service, when needed, for a fixed annual premium. A few months later we extended this type of service to a number of other employed groups. The services rendered under these agreements were in private and semi-private rooms, and the premiums charged could hardly be paid by persons of the lower income groups. In order to reach the persons on the lower income levels, a plan was devised during 1936 whereby complete hospital service could be secured by groups of employed individuals for \$3.65 a year - one cent a day. Many of these persons would probably come to us as free patients if some periodic group payment plan was not made available to them.

Realizing that this small premium would support the plan only after we had secured a large volume of membership, an appeal

was made to the Julius Rosenwald Fund for a subsidy until sufficient volume could be secured. Our request was granted, and in November we began the sale of contracts. It is our opinion that through the operation of this plan, the services of the hospital will be made available to more people and our earnings will be considerably increased.

HOSPITAL PERSONNEL

It is our objective to have every person in the employ of Flint-Goodridge Hospital the very best individual that can be found for the purpose; to set high standards of excellence of performance for every class of work; and to see to it that each person measures up fully to that standard. Only through the pursuit of these objectives can that excellence of service be obtained that will result in the fullest and best care of the patient, and a state of good spirit and cooperation among the hospital personnel.

Each of the departments in the hospital is headed by a professionally qualified person with the exception of one. In December, 1936 a fellowship was made available by the Julius Rosenwald Fund for the training of a person for this department.

CONCLUSION

The genius of the whole Flint-Goodridge idea is that of pooling the intelligence and resources of both colored and white people in a great community enterprise - a policy which has developed tremendously a breadth of understanding and of cooperation among both groups in New Orleans. The interracial Board of

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Trustees, Medical Advisory Board, Medical Staff and Administrative Staff have produced results which are frequently pointed to throughout many sections of the country as an outstanding demonstration in interracial cooperation for the achievement of community betterment.

APPENDIX

1. Comparative Five Year Financial Report
2. Some Pertinent Figures

EARNINGS, CONTRIBUTIONS, EXPENSES

Comparative Five Year Statement

	<u>1932</u> (1)	<u>1933</u>	<u>1934</u>	<u>1935</u>	<u>1936</u>
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EARNINGS

Day Charges:

Compensation	\$ 6,223.85	\$ 6,211.80	\$ 5,648.27	\$ 4,647.89	\$ 8,723.82
Other Full Pay	5,008.07	5,165.12	6,010.09	7,838.50	8,091.54
Part Pay	3,400.19	4,138.60	3,617.69	2,721.05	2,499.75
Operating-Delivery					
Rooms	3,065.00	3,018.50	3,621.20	3,432.75	4,555.65
Laboratory	2,435.45	1,764.60	1,738.50	1,794.35	2,260.70
Pharmacy	2,042.08	2,170.12	2,440.07	4,874.64	4,317.58
X-ray	2,450.25	2,133.27	1,874.96	1,943.45	2,434.73
Clinic-Emergency	1,668.64	2,049.42	2,262.74	1,830.53	1,598.34
Sundries	649.43	905.80	1,139.59	3,233.42	2,728.34
Total	\$26,942.96	\$27,557.23	\$28,353.11	\$32,316.58	\$37,210.45

CONTRIBUTIONS

University &					
Church Boards	\$13,400.00	\$14,650.00	\$16,220.00	\$15,879.86	\$14,939.24
Community Chest	2,814.00	2,342.52	3,982.77	6,000.00	6,000.00
Sundries	-	270.00	1,049.04	1,212.42	1,967.34
Total	\$16,214.00	\$17,262.52	\$21,251.81	\$23,092.28	\$22,906.58

EXPENSES

Administration	\$ 8,051.89	\$ 7,406.24	\$ 7,901.75	\$ 7,324.93	\$ 7,960.03
Medical Services					
Records	2,552.80	1,976.22	1,987.34	1,450.19	1,605.84
Nursing	5,614.55	5,661.46	7,202.74	8,575.35	8,788.74
Dietary	9,169.46	7,990.14	7,900.71	9,303.83	10,282.19
Operating-Delivery					
Rooms	1,916.92	1,778.86	1,594.32	1,412.44	2,135.94
Clinic-Emergency	303.57	455.61	836.01	968.05	1,036.28
Social Service	1,191.33	1,585.75	2,158.80	2,477.21	2,778.37
Laboratory	1,025.52	936.62	1,033.75	1,160.85	1,165.17
Pharmacy	2,870.03	1,578.79	1,934.98	4,023.55	4,390.78
X-ray	1,278.61	1,082.14	930.85	1,044.58	1,168.46
Housekeeping	2,893.94	2,856.80	2,755.88	3,851.73	3,785.89
Maintenance &					
Repair	683.15	874.76	1,068.89	1,126.39	1,572.89
Heat-Light-Power	8,813.18	8,964.19	8,687.77	8,425.14	8,620.13
Laundry	2,005.89	2,112.73	1,845.40	1,519.22	1,932.65
Hospital Supplies	904.66	633.87	589.58	1,770.54	1,938.27
Insurance	787.61	364.61	858.64	973.58	841.66
Total	\$50,063.11	\$46,258.79	\$49,287.41	\$55,408.08	\$60,003.29

(1) The hospital operated for 11 months in 1932.

EARNINGS, CONTRIBUTIONS, EXPENSES

Comparative Five Year Statement

	<u>1932</u>	<u>1933</u>	<u>1934</u>	<u>1935</u>	<u>1936</u>
<u>SUMMARY</u>					
Earnings	\$26,942.96	\$27,557.23	\$28,353.11	\$32,316.58	\$37,210.45
Contributions	<u>16,214.00</u>	<u>17,262.52</u>	<u>21,251.81</u>	<u>23,092.28</u>	<u>22,906.58</u>
	<u>\$43,156.96</u>	<u>\$44,819.75</u>	<u>\$49,604.92</u>	<u>\$55,408.86</u>	<u>\$60,117.03</u>
Expenses	\$50,063.11	\$46,258.79	\$49,287.41	\$55,408.08	\$60,003.29
Operating Loss	\$ 6,906.15	\$ 1,439.04			
Operating Gain			\$317.51	\$.78	\$ 113.74
Uncollectable & Doubtful Accounts (2)		\$ 1,803.71	\$ 2,904.79	\$ 2,898.86	\$ 2,198.07
Net Loss	\$ 6,906.15	\$ 3,242.75	\$ 2,587.28	\$ 2,898.08	\$ 2,084.33

(2) Listed under year in which written off; are losses from earnings of previous year.

Percentage of earnings uncollected:

1932 - 6.7%
1933 - 10.5%
1934 - 10.2%
1935 - 6.8%

STATEMENT OF ASSETS & LIABILITIES
AS OF DECEMBER 31, 1936

A S S E T S

Cash	\$ 796.70
<u>Unavailable Frozen Deposits:</u>	
Hibernia Bank & Trust Company	\$ 233.91
Canal Bank & Trust Co. - Acquired by Legacy (contra)	<u>4,332.17</u>
	4,566.08
<u>Accounts Receivable:</u>	
Patients	4,829.77
Dillard University	2,724.81
Sundry	<u>166.58</u>
	7,721.16
New Equipment - Depreciated	518.83
Pharmacy Inventory	<u>555.51</u>
	<u>\$14,158.28</u>

L I A B I L I T I E S

Unpaid Bills	\$3,300.32
Dillard University: Advances from Building Fund	14,629.19
Restricted Funds	<u>158.56</u>

R E S E R V E S

Reserve for Future Collection of Frozen Funds Acquired by Legacy (contra)	<u>4,332.17</u>
	<u>\$22,420.24</u>
Deficit - December 31, 1936	<u>8,261.96</u>
	<u>\$14,158.28</u>

SOME PERTINENT FIGURES

	<u>1932</u>	<u>1933</u>	<u>1934</u>	<u>1935</u>	<u>1936</u>
1. Cost Per Clinic Visit	56¢	27¢	30.5¢	27.7¢	35.3¢
2. Prepared Meal Cost (1)	12.1¢	11.9¢	11.9¢	14.6¢	17.6¢
3. Average Days Stay:					
(a) All Patients	9.9	10.3	9.7	8.5	8.4
(b) Compensation	10.3	10.6	10.5	8.7	11.2
(c) Other Full Pay	8.5	8.9	8.3	7.3	6.5
(d) Part Pay Patients	11.9	11.0	9.7	6.9	7.2
(e) Free Patients	11.0	11.8	11.7	10.3	9.4
4. Births	63	109	177	224	181
5. Deaths	45	48	49	49	55
6. Percent Post Mortems	60%	33.3%	51%	16.3%	32.7%
7. <u>Patients Admitted to Hospital</u>					
Compensation	220	197	180	200	273
Other Full Pay	226	225	275	319	414
Part Pay	115	180	201	212	224
Newly Born	63	97	172	212	181
Free	353	430	442	582	587
Total	977	1,129	1,270	1,525	1,679
8. <u>Days of Hospital Care Given</u>					
Compensation	2,269	2,087	1,888	1,744	3,065
Other Full Pay	1,554	1,665	1,909	2,322	2,709
Part Pay	1,371	1,971	1,962	1,470	1,614
Newly Born	606	847	1,396	1,467	1,157
Free	3,888	5,065	5,183	5,953	5,508
Total	9,688	11,635	12,338	12,956	14,053
9. Average Total Occupancy	32.8%	35.9%	38.4%	40.5%	43.3%
Average Free Occupancy	45.6%	50.8%	52.5%	58.8%	46.4%
10. New Patients Admitted to Each Clinic					
Medicine	419	530	543	562	441
Surgery	356	551	526	603	568
Pediatrics	340	576	484	483	368
Gynecology & Obstetrics	278	344	423	413	285
Urology	114	157	126	102	105
Ear, Nose, Throat	249	334	276	271	233
Eye	102	139	119	113	105
Special	-	369	331	105	200
Total	1,858	3,000	2,828	2,652	2,305

(1) Exclusive of fuel, light and heat.

	<u>1932</u>	<u>1933</u>	<u>1934</u>	<u>1935</u>	<u>1936</u>
11. Total Visits to Each Clinic					
Medicine	2,035	3,859	5,542	7,664	6,251
Surgery	1,253	2,613	2,657	3,156	2,988
Pediatrics	1,242	3,507	2,784	2,635	2,095
Gynecology & Obstetrics	803	1,576	2,230	2,563	2,105
Urology	1,130	2,233	2,109	2,019	1,540
Ear, Nose, Throat	925	1,473	1,476	1,742	1,388
Eye	402	845	1,056	1,200	1,078
Special	-	369	331	105	200
Total	<u>7,790</u>	<u>16,475</u>	<u>18,185</u>	<u>21,084</u>	<u>17,645</u>

12. Free and Pay Visits					
Free Visits	3,226	10,789	11,833	17,099	9,600
Pay Visits	<u>4,564</u>	<u>5,686</u>	<u>6,352</u>	<u>3,985</u>	<u>8,045</u>
Total	<u>7,790</u>	<u>16,475</u>	<u>18,185</u>	<u>21,084</u>	<u>17,645</u>

13. Percent Free	41.4	65.5	65.1	81	54.1
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14. Free Patients Admitted for Teaching Purposes					
Medicine	39	49	29	55	59
Surgery	91	98	91	101	147
Pediatrics	40	60	74	95	103
Gynecology & Obstetrics	96	100	141	223	174
Urology	9	10	16	13	14
Ear, Nose, Throat	73	107	82	81	86
Eye	<u>5</u>	<u>6</u>	<u>9</u>	<u>14</u>	<u>6</u>
Total	<u>353</u>	<u>430</u>	<u>442</u>	<u>582</u>	<u>589</u>

15. Percentage of private patients treated by Negro and white doctors and compensation insurance company doctors.

	<u>1932</u>	<u>1936</u>
Negro	33.2%	37.3%
White	21.6%	25.2%
Compensation Insurance Cases	45.1%	37.5%